

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JW	76331	
O.I.P.E. CLASSIFIER		8	2-599
FORMALITY REVIEW	AV	21423 21423	2-22-97 5-6-97

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) ... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1	1-27-97
2	1-27-97
3	1-27-97
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here